DLN: 93493321106270 OMB No. 1545-0047

2019

Department of the Treasury

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

 \blacktriangleright Do not enter social security numbers on this form as it may be made public.

 \blacktriangleright Go to $\underline{\textit{www.irs.gov/Form990}}$ for instructions and the latest information.

Open to Public Inspection

		ue Service					
A F	or the	2019 c	alendar year, or tax year beginning 01-01-2019 , and ending 12-3: C Name of organization	L-2019	1		
		plicable:	BOY SCOUTS OF AMERICA		D Employer i	dentifi	cation number
	dress ch me chai	-			22-157630	00	
	tial retu	-	Doing business as	_			
☐ Fina	al return/	terminated			E Telephone n		
	nended i		Number and street (or P.O. box if mail is not delivered to street address) Room/sui 1325 West Walnut Hill Lane	te			
⊔ Ар	piicatior	n pending	City or town, state or province, country, and ZIP or foreign postal code		(972) 580	-2000	
			Irving, TX 750383008		G Gross receip	ots \$ 1,	947,782,269
			F Name and address of principal officer:	H(a) Is this	a group retur	n for	
			Michael A Ashline 1325 West Walnut Hill Lane	subor	dinates?		□Yes ☑ No
			Irving, TX 750383008	H(b) Are all include	ll subordinates		☐ Yes ☐No
I Ta	x-exem	pt status:	☑ 501(c)(3) ☐ 501(c)() ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527		eur ," attach a list.	(see	
J W	ebsite	:► ww	w.Scouting.org	H(c) Group	exemption nu	mber	▶ 1761
				L Year of forma	ation: 1910 M	State	of legal domicile: TX
K Forr	n of org	anization:	☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L real of forms	1910	State	or legal dofficile. 17
Pa	art I	Sum	mary		 		
			scribe the organization's mission or most significant activities:				
			in the Boy Scouts of America Charter - The primary exempt purpose of the y organizations, and cooperation with other agencies, the ability of boys to				
e O	So	coutcraft	, and to teach them patriotism, courage, self-reliance, and kindred virtues,				
ĕ	<u>Bo</u>	by Scout	S				
ш	=						
Š.	-						
Activities & Governance			s box $lacktriangle$ if the organization discontinued its operations or disposed of m				
S	l		of voting members of the governing body (Part VI, line 1a)			3	85
Ě	l		of independent voting members of the governing body (Part VI, line 1b) .		•	4	84
ŧ	5 ⊺	Total nun	nber of individuals employed in calendar year 2019 (Part V, line 2a)		•	5	4,026
ď	l		nber of volunteers (estimate if necessary)		•	6	770,352
	l		elated business revenue from Part VIII, column (C), line 12			7a	-1,591,969
	b N	let unrel	ated business taxable income from Form 990-T, line 39			7b	0
				Pri	or Year		Current Year
ġ.	l		ions and grants (Part VIII, line 1h)	142,788,626	_	113,896,616	
Ravenue	l		service revenue (Part VIII, line 2g)		84,335,881	+	116,449,627
Ş.	l		ent income (Part VIII, column (A), lines 3, 4, and 7d)		32,060,235		
	l		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		25,966,572	1	33,287,646
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		285,151,314	 	408,616,814
	l		nd similar amounts paid (Part IX, column (A), lines 1–3)		1,810,546	<u> </u>	5,404,626
	l		paid to or for members (Part IX, column (A), line 4)		75 402 205		0
88	l		other compensation, employee benefits (Part IX, column (A), lines 5–10)		76,482,298	1	79,231,987
ર્કે			nal fundraising fees (Part IX, column (A), line 11e)		100,976	<u>'</u>	89,938
Expenses	l		raising expenses (Part IX, column (D), line 25) >5,794,894		265 041 222		245 766 027
	l		penses (Part IX, column (A), lines 11a-11d, 11f-24e) enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		265,041,332	_	345,766,827
	l		less expenses. Subtract line 18 from line 12		343,435,152 -58,283,838	+	430,493,378 -21,876,564
_ (r)	19 5	Revenue	less expenses. Subtract line to from line 12	Reginning	of Current Year	-	End of Year
Net Assets or Fund Balances				beginning	or carrein redi		Liid Oi Teal
sse.	20 ⊺	Total ass	ets (Part X, line 16)		1,408,364,279)	1,208,642,215
₹ B B	21 T	otal liab	ilities (Part X, line 26)		875,841,040		800,602,679
ž.	22 N	let asset	s or fund balances. Subtract line 21 from line 20		532,523,239)	408,039,536
Pa	rt II	Signa	ature Block				
			erjury, I declare that I have examined this return, including accompanying				
	nowled		f, it is true, correct, and complete. Declaration of preparer (other than offic	er) is based o	n all informatio	on or v	mich preparer has
		l k					
		Signati	ure of officer	202 Dat	0-11-16		
Sign		(Dut	-		
Here	•		l Ashline Chief Financial Officer r print name and title				
		<u> </u>	·	ate	□ PTII	N.	
Da:-	4		Treparer 5 signature	Che	ck 📙 if	•	
Paid		, _F	irm's name		-employed n's EIN ►		
	pare	•					
use	Onl	y F	irm's address ▶	Pho	ne no.		
May t	he IRS	discuss	this return with the preparer shown above? (see instructions) $\ \ . \ \ \ .$	<u></u>	<u>.</u>	_ Y	es 🗆 No
For P	aperw	vork Re	duction Act Notice, see the separate instructions.	Cat. No. 1	.1282Y		Form 990 (2019)

Form	990 (2019)					Page 2
Pa	rt III Statemen	t of Program Serv	ice Accomplis	hments		
	Check if Sch	edule O contains a res	onse or note to	any line in this Part III		🗹
1	Briefly describe the	organization's mission				
						ough community organizations, tcraft, (Continued on Schedule
2	-		cant program ser	vices during the year v	which were not listed on	. □Yes ☑No
	the prior Form 990					. ∟ Yes ⊻ No
_	•	nese new services on S				
3	_	n cease conducting, or	make significant	changes in now it con	ducts, any program	. □Yes ☑No
	services?					. ∟Yes ⊻No
_	•	nese changes on Sched				
4	Section $501(c)(3)$ a		ions are required	to report the amount	e largest program services, as of grants and allocations to o	
4a	(Code:) (Expenses \$	42,365,613	including grants of \$	3,157,742) (Revenue \$	2,708,409)
	See Additional Data					· · · ·
4b	(Code:) (Expenses \$	11,256,099	including grants of \$	0) (Revenue \$	721,237)
	See Additional Data					_
4c	(Code:) (Expenses \$	90,381,791	including grants of \$	1,567,001) (Revenue \$	57,075,798)
	See Additional Data					
	See Additional Data	a Table				
4d		ices (Describe in Sche	•			
	(Expenses \$	224,527,341 in	cluding grants of	\$	0) (Revenue \$	55,897,076)
4e	_Total program se	rvice expenses 🕨	368,530,8	44		

Form	990 (2019)			Page 3
Par	tiV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🗳	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,Part</i> I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d	Yes	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	Yes	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		No

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

No

20a

20b

21

Yes

rm 9	990 (2019)			Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes,"</i> complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Parl				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 637			

1b

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

1c

Yes

Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: ▶BF , CA , RQ , VQ			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-		
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b			
С	When the diguillation is need to issue qualified fleating plans.	-		
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		.10
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

01111	770 (2022	,			rage C			
Par	8a,	vernance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. eck if Schedule O contains a response or note to any line in this Part VI	" respo	nse to	lines 🔽			
Se	ction A.	Governing Body and Management	-					
				Yes	No			
la		number of voting members of the governing body at the end of the tax year 1a 85						
	body, or i	re material differences in voting rights among members of the governing f the governing body delegated broad authority to an executive committee or mmittee, explain in Schedule O.						
b	Enter the	number of voting members included in line 1a, above, who are independent 1b 84						
2		fficer, director, trustee, or key employee have a family relationship or a business relationship with any other rector, trustee, or key employee?	2		No			
3		ganization delegate control over management duties customarily performed by or under the direct supervision , directors or trustees, or key employees to a management company or other person?	3		No			
4	Did the o	ganization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No			
5	Did the o	ganization become aware during the year of a significant diversion of the organization's assets? .	5 6		No			
6								
7a		ganization have members, stockholders, or other persons who had the power to elect or appoint one or more of the governing body?	7a		No			
b	Are any g	overnance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ther than the governing body?	7b		No			
8	Did the o	ganization contemporaneously document the meetings held or written actions undertaken during the year by ing:						
а	The gove	ning body?	8a	Yes	ĺ			
ь	Each com	mittee with authority to act on behalf of the governing body?	8b	Yes				
9		ny officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
		on's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ction B.	Policies (This Section B requests information about policies not required by the Internal Revenue	e Coae	Yes	No			
10a	Did the o	ganization have local chapters, branches, or affiliates?	10a	Yes				
		lid the organization have written policies and procedures governing the activities of such chapters, affiliates,	100					
_		hes to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes				
11a	Has the of form?	rganization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a		No			
b	Describe	n Schedule O the process, if any, used by the organization to review this Form 990						
12a	Did the o	ganization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were office conflicts?	ers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes				
С	Schedule	ganization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in O how this was done	12c	Yes				
13	Did the o	ganization have a written whistleblower policy?	13	Yes				
14		ganization have a written document retention and destruction policy?	14	Yes				
15	persons,	ocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision?						
	-	ization's CEO, Executive Director, or top management official	15a	Yes				
b		cers or key employees of the organization	15b		No			
16a	Did the o	ganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
		ntity during the year? In the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		No			
ъ	in joint ve	nture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt h respect to such arrangements?	16b					
Se	ction C	Disclosure	-00					
17		ates with which a copy of this Form 990 is required to be filed▶						
		AL , AR , AZ , CA , CT , FL , GA , IL , IN , k MS , NH , NJ , NM , NY , OK , OR , PA , PR VA , WA , WI , WV						
18	only) ava	104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s lable for public inspection. Indicate how you made these available. Check all that apply.						
10		website						
19		n Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest d financial statements available to the public during the tax year.						
20	State the	name, address, and telephone number of the person who possesses the organization's books and records: ie Phillips 1325 West Walnut Hill Lane Irving, TX 750383008 (972) 580-2300						

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. Isist all of the organization's current key employees, if any. See instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (C) Average hours per week (list any hours per week list any hours per week lis	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. List all of the organization's furrent key employees, if no. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization or any current officer, director, or trustee. (A) Name and title A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee. (B) A Reportable compensation or trustee of the organization or trustee. (C) (B) A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. ■ List all of the organization which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Average hours per week (list any hours for related organizations below dotted line) ■ (C) Reportable compensation from the organization organization organization organization organizations organi	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. See instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line) ■ Check this box if neither the organization or any related organization organization or any related organization or any related organization organiza	year.		•						, ,		-	n's ta	Κ
List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ● List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization. ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. ● List all of the organization than \$10,000 of reportable compensation from the organization nor any related organization and any related organization compensated any current officer, director, or trustee.	of compensation. Enter -0- in columns (D), (E), and (F) if no	compe	nsati	on w	/as	oaid.		.,				
who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization from the organization and any related organizations. ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any related organization nor any neither the organization nor any neither than the organization nor any neither the organization nor any neither the organization nor any neither than the organization n													
■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (C) (D) (E) Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee) (C) (D) (E) Reportable compensation from the organization (W-2/1099-MISC) (W-2/1099-MISC) MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations.													
Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organizations (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title Average hours per week (list any hours for related organizations below dotted line) Name and title Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	nated of oth nsation the	n
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	rel	ated	
	See Additional Data Table												
													—
													—

Pai	Section A. Officers, Direct	tors, Trustees	, Key	Emp	loye	es,	and	High	nest Compensat	ed Employees (conti	nued)	rage o
	(A) Name and title	(B) Average hours per week (list any hours	than o	ne b	ox, u n of	t che inle: ficer	and a	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		Estima Estima amount o compens from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		organizati relat organiza	ed
See	Additional Data Table												
											+		
											+		
											+		
											+		
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c T	Sub-Total	art VII, Section	Α.				>						
	Total (add lines 1b and 1c) Total number of individuals (including					h a	• 		6,404,939		0		2,455,646
2	of reportable compensation from the			e list	eu a	DOV	e) wiic	rece	eiveu more man ş.	100,000			
												Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> 2									l employee on	_		
4	For any individual listed on line 1a, is organization and related organization	the sum of repos s greater than \$	ortable (3150,00	comp 0? <i>If</i>	ensa "Yes	tion	n and d	other	compensation from	n the	3	Yes	
_	individual					•	•				4	Yes	
5	Did any person listed on line 1a recei- services rendered to the organization									lividual for	5		No
Se1	ection B. Independent Contract Complete this table for your five high		d inden	ender	nt co	ntra	ectors	that	received more tha	n \$100 000 of con	nenc	ation	
_	from the organization. Report compe	nsation for the o	alendar	year	end	ing	with o	r wit	hin the organization	n's tax year.	препа		
		(A) and business addre	ess							(B) cription of services		(C Comper	sation
Ogleti PO Bo	ree Deakins Nash Smoak & Stewart PC								LEGAL			7	,379,027
Colum	nbia, SC 29202 NGTON & BURLIN LLP								CONSULTI	lG.		2	,886,391
ONE (850 1	CITY CENTER OTH ST NW											_	,000,031
	INGTON, DC 20001 Y AUSTIN LLP								LEGAL			5	,856,103
	SOUTH DEARBORN												
	go, IL 60606 REZ & MARSAL HOLDINGS LLC								CONSULTI	I G		7	,078,176
600 M 8TH F	IADISON AVE												
NEW '	YORK, NY 10022								LECAL				005 247
,	N EMANUEL URQUHART & SULLIVAN LLP FIGUEROA STREET								LEGAL			9	,005,347
10TH	FLOOR NGELES, CA 90017												
2 7	otal number of independent contractor		not lim	ited 1	to th	ose	listed	abov	ve) who received m	ore than \$100,00	0 of		
	ompensation from the organization $ hlimits$	/ 1											

orm 9 Part		(2019) Statement	of F	Revenue						Page 9
raii	VIII				respo	onse or note to any	line in this Part VIII			🗆
					•	ĺ	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	18	a Federated campa	aigns	s	1 a	26,355	L	revenue		512 - 514
ints ints		b Membership dues	s .	. [1 b	84,249,903				
Gra mot	,	c Fundraising even	its .		1c	171,363				
Ę,	,	d Related organiza	tions	5	1d	2,575,543				
nila n	,	e Government grants	(con	tributions)	1e	0				
ons, Sin	1	f All other contribution and similar amounts				26.072.452				
Contributions, Gifts, Grants and Other Similar Amounts	!	above g Noncash contributio lines 1a - 1f:\$		L	1f	26,873,452				
n bu		h Total. Add lines :	1 = - 1	L f	1 g	1,070,746				
9		Total /taa iiies			•	Business Code	113,896,616	T		
	2a	High Adventure Bases	s in N	NM, FL, MN, and	d WV		44,626,674	44,553,251	73,423	0
an						900099	55.007.276	FF 007 076		
Reven	b	Local Council Assessr	nents	5		900099	55,887,376	55,887,376	0	0
Service Revenue	_	National Eagle Scout				900099	1,797,536	1,797,536	0	0
n Ser	d	Regional and Professi	ional	Training		900099	3,429,646	3,429,646	0	0
Program	е	Other Conferences ar	nd Se	eminars		900099	5,403,845	5,403,845	0	0
Œ	f	All other program	serv	rice revenue.			5,304,550	5,304,550	0	0
	g	Total. Add lines 2	2a-2	.f	•	116,449,627	_			
		Investment income similar amounts)		luding divide		nterest, and other	10,605,506	0	236,052	10,369,454
		Income from invest				ond proceeds	0	0	0	0
	5	Royalties				•	6,934,743	0	0	6,934,743
				(i) Rea	l	(ii) Personal	-			
	6a	Gross rents	6a	3,1	26,583	3				
	b	Less: rental expenses	6b	,	94,006	5 (
	c	Rental income	-		94,000		4			
		or (loss)	6 c		32,577	r C	<u> </u>			
	C	Net rental income	or				2,832,577	0	147,938	2,684,639
	7a	Gross amount from sales of assets other	7a	(i) Securities 1,554,483,719		(ii) Other 3,303,315	-			
	b	than inventory Less: cost or other basis and	7b	1,418,7	58,922	2 4,650,693	_			
		sales expenses	<u> </u>							
		Gain or (loss) Net gain or (loss)	7c	135,7	24,797	1	134,377,419	0	0	134,377,419
Other Revenue		Gross income from fu (not including \$ contributions reporter	ındra	171,363 of		•	101,077,113			10 1,577,113
eve		See Part IV, line 18	٠		8a	191,116				
r R		Less: direct expen			8b	136,014				55.400
the	C	: Net income or (los	ss) fr	om fundraisi	ng ev	ents 🕨	55,102		0	55,102
	9a	Gross income from See Part IV, line 19			9a					
		Less: direct expen			9b					
	C	: Net income or (los	ss) fr	om gaming a	Ctivit	les -	1			
	10	aGross sales of inve returns and allowa	ento ance:	ry, less s	10a	132,090,249				
		Less: cost of good			10 b] 16,764,429	0	-2,049,382	18,813,811
	C	Net income or (los Miscellaneo			nvent	Business Code	16,764,429	0	-2,049,382	16,613,611
	11	-aHigh Adventure B Revenues				900099	6,428,636	o	0	6,428,636
	b	Other Regional Re	even	ues		900099	214,155	0	0	214,155
	c	National Eagle Sco Revenues	out A	Association -	Other	900099	58,004	0	0	58,004
	c	All other revenue					0	0	0	0
	e	Total. Add lines 1	1a-:	11d		•	6,700,795			
	12	Total revenue. S	ee ir	nstructions .				116 276 204	1 501 000	170.025.003
							408,616,814	116,376,204	-1,591,969	179,935,963 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must co		_		mn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			<u>.</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,064,648	4,064,648		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	660,095	660,095		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	679,883	679,883		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,055,829	2,430,069	1,844,675	781,085
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	57,013,503	42,754,457	14,121,848	137,198
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	4,561,080	3,420,356	1,129,748	10,976
9 Other employee benefits	8,869,869	7,193,458	1,632,428	43,983
10 Payroll taxes	3,731,706	2,798,408	924,318	8,980
11 Fees for services (non-employees):				
a Management				
b Legal	1,310,952	1,152,050	0	158,902
c Accounting	851,809	840	850,969	0
d Lobbying	200,300		200,300	
e Professional fundraising services. See Part IV, line 17	89,938			89,938
f Investment management fees	1,310,364		1,310,364	<u>, , , , , , , , , , , , , , , , , , , </u>
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,925,500	1,595,174	1,271,954	58,372
12 Advertising and promotion	2,236,111	2,091,220	3,307	141,584
13 Office expenses	7,201,118	6,964,946	154,895	81,277
14 Information technology	12,483,156	10,735,514	1,747,642	<u> </u>
15 Royalties				_
16 Occupancy	13,702,619	3,634,041	9,749,593	318,985
17 Travel	3,004,396	2,286,332	571,503	146,561
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	-,,	_,		
19 Conferences, conventions, and meetings	16,924,760	16,044,393	336,291	544,076
20 Interest	7,603,561	. ,	7,603,561	
21 Payments to affiliates	30,256,711	30,256,711	.,,	
22 Depreciation, depletion, and amortization	8,612,765	7,063,930	1,544,699	4,136
23 Insurance	134,789,765	131,109,617	3,679,116	1,032
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	10 17 03 7 00	20272037027	3,0,7,110	1,002
a Other Expenses	14,850,529	4,176,895	7,406,065	3,267,569
b Taxes, Permits, and Licenses	431,980	393,255	38,725	0
c Insurance Claims	85,436,251	85,436,251	0	0
d Professional Dues and Memberships	1,634,180	1,588,301	45,639	240
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	430,493,378	368,530,844	56,167,640	5,794,894
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ► ☐ if following SOP 98-2 (ASC 958-720).	1	I		

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Liabilities

Fund Balances

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Assets 30

27

28

31

32

33

125,884,658

69,775,749

34,516,019

5.986.550

67.230.736

34,647,006

102,428,639

336,289,451

80,216,326

351,667,081

294,178,727

41,512,741

186.804.824

37,712,317

240,394,070

800.602.679

281.948,777

126,090,759

408,039,536

1,208,642,215

Form 990 (2019)

1,208,642,215

(B) End of year

Beginning of year

54,992,329

53,070,296

88,296,215

4,924,600

67.956.194

24,342,958

104,313,592

374,186,183

303.120.975

333,160,937

1,408,364,279

284,635,196

92,147,800

192,733,142

64,356,159

241,968,743

875.841.040

406,188,008

126,335,231

532,523,239

1,408,364,279

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Page **11**

Check if Schedule O contains a response or note to any line in this Part IX			
		Б	 (/

Cash-non-interest-bearing 2 Savings and temporary cash investments . . . 3

Pledges and grants receivable, net . . .

Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net Assets

Inventories for sale or use . .

Prepaid expenses and deferred charges .

10a

10b

238,779,351 136,350,712

10a Land, buildings, and equipment: cost or other

basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . . . 13 Investments—program-related. See Part IV, line 11 .

14

Intangible assets .

Other assets. See Part IV, line 11 . . .

15 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses . 18

Grants payable . Deferred revenue . . .

Tax-exempt bond liabilities . . .

Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

22 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties .

Other liabilities (including federal income tax, payables to related third parties,

23 24 25 and other liabilities not included on lines 17 - 24).

Complete Part X of Schedule D

Total liabilities. Add lines 17 through 25 . .

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

26

Organizations that follow FASB ASC 958, check here <a> \square and

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3h

No

Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 19009572

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990 (2019) Form 990, Part III, Line 4a:

Software Version: v1.00

Field Operations - Support for 266 local councils, including but not limited to, administration of the Journey to Excellence program, business process assessments, assistance with long range planning, member care services for professionals and volunteers and local council and regional support.

Form 990, Part III, Line 4b: Human Resources and Training - Administration of human resources policies, including recruiting, placement, and training of professional employees, managing

compensation and benefits programs; and monitoring employee relations.

Program Development and Delivery - Development of the program for over 2 million registered youth and over 750 thousand adult leaders; providing camping and outdoor literature, materials, and techniques, as well as engineering service, to local councils; managing the volunteer training programs of the Boy Scouts of America and handling all national program support in the areas of health and safety, activities, program evaluation, and low-income program; developing uniforms and insignia and other program

elements; operating the National Scouting Museum; operating four high-adventure bases and the national jamboree.

Form 990, Part III, Line 4c:

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

others, the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 9,131,760 including grants of \$ 0) (Revenue \$ 9,700)

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

Marketing - Administration of public relations, including providing news releases, features for print and broadcast media, and internal news in the

form of newsletters, fact sheets, and the annual report for the nationwide Scouting family. In addition, protection and promotion of the Scouting brand. (Code:) (Expenses \$ 213,850,849 including grants of \$ 0) (Revenue \$ 55,887,376) Scouting Programs: Insurance Costs Born for National and Local Councils - The National Council subsidized the group medical, dental, and life insurance programs for its employees and retirees. In addition, the National Council subsidized a general liability insurance program primarily for the benefit of local councils.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

international training programs and conferences, program related magazines, brochures and pamphlets.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 1,544,732 including grants of \$ 0) (Revenue \$ Scouting Programs: World Bureau Fees - The registration fee that Boy Scouts of America annually pays the World Organization of the Scouting

Movement (WOSM) is based on an established fee of registered uniformed adult and youth members. This registration fee supports international enrichment programs for the youth and adult membership. These programs include World Jamborees, National Association encampments,

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

Patrick Sterrett

John Mosby

Ron Oats

ACSE, Development

Regional Director

Frederick Wallace

Regional Director

Steven McGowan

Chief Strategy Officer

Erin Eisner

Secretary

ACSE, Natl Dir Field Services

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Michael B Surbaugh President	5.00	X		х				909,437	0	204,790
Michael A Ashline Treasurer	40			х				556,282	0	159,741
Al Lambert ACSE, Outdoor Adventures	40				х			413,391	0	237,965
Mark Logemann ACSE, Natl Dir Support Services	40				х			445,744	0	191,257
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343,900

313,405

487,248

463,536

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186,054

191,268

215,366

227,578

43,496

52,570

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations		
Jeffrey Hunt Regional Director	40					х		350,880	0	157,698		
Lisa Young HR Group Director	40					×		268,688	0	180,362		
Todd McGregor Summit Group Director	40				х			214,128	0	223,547		
Brad Farmer ACSE, Development	40 6				х			273,080	0	89,538		

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275,743

288,847

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30,140

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Summit Group Director	
Brad Farmer	
ACSE, Development	
Mark Winkelman	
Supply Group Director	
Vijay Challa	

Group Director - Chief Information Officer

Tanya Acker

Glenn Adams

Lisa Argyros

Natl Exec Board Member

Natl Exec Board Member

David Alexander

Natl Exec Board Member

Natl Exec Board Member

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

	any hours	and	a dir	ecto	or/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jeanne Donlevy Arnold Natl Exec Board Member	1 0	Х						0	0	0	
Bray B Barnes Natl Exec Board Member	1	х						0	0	0	
Scott W Beckett Natl Exec Board Member	0	х						0	0	0	
David Biegler	1	Х						0	0	0	

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Natl Exec Board Member B Howard Bulloch

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member Hannah Carter May-Dec 2019

Natl Exec Board Member Dennis H Chookaszian

Natl Exec Board Member Scott Christensen

Natl Exec Board Member

Dan Cabela

Ray T Capp

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

	any hours	and	a dir	recto		ustee)	·	organization	organizations	from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations		
David M Clark Natl Exec Board Member	1 0	Х						0	0	0		
Keith A Clark Natl Exec Board Member	1	х						0	0	0		
D Kent Clayburn Natl Exec Board Member	0	х						0	0	0		
Ronald O Coleman	1											

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Natl Exec Board Member
D Kent Clayburn
Natl Exec Board Member
Ronald O Coleman
Natl Exec Board Member

Wesley Coleman

Philip M Condit

Joe Crafton

Gary Crum

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member William F Cronk

Natl Exec Board Member

Natl Exec Board Member John C Cushman III

Natl Exec Board Member

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	a dir	recto		ustee)	′ I	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Charles W Dahlquist II Natl Exec Board Member	0	Х						0	0	0	
Devang Desai Natl Exec Board Member	0	х						0	0	0	
Douglas H Dittrick Natl Exec Board Member	0	Х						0	0	0	
John R Donnell Jr	1	Х						0	0	0	

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Douglas H Dittrick
Natl Exec Board Member
John R Donnell Jr
Natl Exec Board Member
L B Eckelkamp Jr

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Natl Exec Board Member Thomas C Edwards

Natl Exec Board Member Craig E Fenneman

Natl Exec Board Member

Natl Exec Board Member Dr Robert M Gates

Natl Exec Board Member

Natl Exec Board Member

Jack D Furst

E Gordon Gee

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	arry riours	l	a un	ecco		usice)	,	(14 2 /4 2 2 2	(IV 2/4 200	monrate	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
John Gottschalk Natl Exec Board Member	1 0	Х						0	0	0	
Jennifer Hancock Natl Exec Board Member	0	х						0	0	0	
J Brett Harvey Natl Exec Board Member	1	Х						0	0	0	
Aubrey B Harwell Jr Natl Exec Board Member	0	Х						0	0	0	
Michael G Hoffman	1	X						0	0	0	

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Natl Exec Board Member Janice Bryant Howroyd

Natl Exec Board Member Raymond E Johns

Natl Exec Board Member

Natl Exec Board Member Nevada A Kent IV May-Dec 2019

Natl Exec Board Member

Natl Exec Board Member

Joy Jones

Ron Kirk

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee)

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	ally liours	anu	i a uii	ecc		ustee,	,	Organization	organizations		
	for related organizations below dotted line)		Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Lyle R Knight Natl Exec Board Member	0	х						0	0	0	
Fred Markham Natl Exec Board Member	1	х						0	0	0	
Francis R McAllister Natl Exec Board Member	1	Х						0	0	0	

Francis R McAllister
Natl Exec Board Member
Drayton McLane Jr
Natl Exec Board Member
C David Moody

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member Arthur F Oppenheimer

Natl Exec Board Member Stephen W Owen

Natl Exec Board Member

Natl Exec Board Member

Ellie Morrison

Jose F Nino

Dan Ownby

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	a di	recto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
R Doyle Parrish Natl Exec Board Member	1	х						0	0	0	
Matthew Parsons May-Dec 2019 Natl Exec Board Member	1 0	х						0	0	0	
Tico A Perez Natl Exec Board Member	1	х						0	0	0	
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Tico A Perez	1	×			
Natl Exec Board Member	1	7.7			
Wayne M Perry	1	×			
Natl Exec Board Member	2				
Pamela Petterchak May-Dec 2019	1				

and Independent Contractors

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Natl Exec Board Member Jeanette H Prenger

Natl Exec Board Member Frank R Ramirez

Natl Exec Board Member

Natl Exec Board Member Robert H Reynolds

Natl Exec Board Member

Natl Exec Board Member

Steve Rendle

Roy S Roberts

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	f	L	a un	 17 (1)	usice	<u>/</u> !	(14/ 3/4000	(14/ 3/4000	inom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
James D Rogers Natl Exec Board Member	1 0	х					0	0	0
Nathan O Rosenberg Natl Exec Board Member	0	х					0	0	0
William Rosner	1	X					0	0	0

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Natl Exec Board Member David Rumbarger

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Natl Exec Board Member

Natl Exec Board Member Alison K Schuler

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member William W Stark Jr

Natl Exec Board Member

Michael E Sears

Wesley J Smith

Scott Sorrels

Jim Ryffel

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	a dir	recto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Randall L Stephenson Natl Exec Board Member	1	X						0	0	(
David L Steward Natl Exec Board Member	0	X						0	0	(
Thear Suzuki	1	Х						0	0	(

David L Steward	1	Y			0	
Natl Exec Board Member	0	^				
Thear Suzuki	1	Х			0	
Natl Exec Board Member	0	, ,			, and the second	
Bradley D Tilden	1	X			0	

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and Independent Contractors

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member Steven E Weekes

Natl Exec Board Member Gary E Wendlandt

Natl Exec Board Member

Natl Exec Board Member

James S Wilson

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Rex W Tillerson

Frank D Tsuru

James S Turley

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

and a director/trustee)

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Thomas Yarboro	1	Х								
Natl Exec Board Member	0	^							0	0
Amanda Covington Jan-May 2019 Natl Exec Board Member	0	Х						0	0	0
Bradley E Haddock Jan-May 2019	1	х						0	0	0

Amanda Covington Jan-May 2019	1	V				
Natl Exec Board Member	0	X			J	
Bradley E Haddock Jan-May 2019	1	X			0	
Natl Exec Board Member	0					
Douglas B Mitchell Jan-May 2019	1	x			0	

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any hours

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and Independent Contractors

Natl Exec Board Member Anthony Peluso Jan-May 2019

Natl Exec Board Member Charles H Smith Jan-May 2019

Natl Exec Board Member Dominic Wolters Jan-May 2019

Natl Exec Board Member

efil	e GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493321106270
SCI	HED	ULE A	- Dublic (Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99			ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	nue Service he organiza OF AMERICA	tion				Employer identific	
BU1 5	C0015	OF AMERICA					22-1576300	
	rt I		for Public Charity Statu				See instructions.	
	rganız		a private foundation because	•			(A)(!)	
1		•	onvention of churches, or as			, ,, ,		
2			scribed in section 170(b)(,	, ,		
3	Ш	·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	ation operated for the benefit (iv). (Complete Part II.)	-		, ,		ped in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
7	✓		ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. Se					ege or university or a
10		from activit investment	ation that normally receives: dies related to its exempt fun income and unrelated busin dee section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations o through 12d that describes	lescribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A s organization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n functionally	on-functionally integrated integrated. The organization i). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
е		Check this	box if the organization received or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter				-			
g	Provi	de the follow	ing information about the su					
	(i) N	Name of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota		l. B. '	tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	000 57) 5545

	(Complete only if you ch	necked the box o	on line 5, 7, or 8	of Part I or if th	ne organization f	ailed to qualify	under Part III.
	If the organization failed	d to qualify unde	r the tests listed	d below, please o	complete Part III	I.)	
	Section A. Public Support Calendar year		T				
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	77,632,390	82,737,396	83,656,244	121,520,178	86,112,645	451,658,853
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	77,632,390	82,737,396	83,656,244	121,520,178	86,112,645	451,658,853
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						16,401,186
6	Public support. Subtract line 5						425 257 667
	from line 4.						435,257,667
	Section B. Total Support	Г					
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	77,632,390	82,737,396	83,656,244	121,520,178	86,112,645	451,658,853
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	16,839,237	18,122,766	14,374,670	18,757,092	20,794,903	88,888,668
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	968,912	1,160,676	734,830	2,732,671	6,700,795	12,297,884
11							552,845,405
12	10 Gross receipts from related activities,	etc. (see instruction	ons)			12	1,222,772,430
	First five years. If the Form 990 is f						
	-	_			•	· · · · · <u>-</u>	_
_	check this box and stop here Section C. Computation of Publi						
	Public support percentage for 2019 (li			column (f))		144	79 730 %
	Public support percentage for 2018 Sc					14	78.730 % 81.258 %
	33 1/3% support test—2019. If the						
	and stop here. The organization qua 33 1/3% support test—2018. If the	lifies as a publicly s	supported organiza	ation			▶ ☑
17 a	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the orgon meets the "facts	ganization did not s-and-circumstance	check a box on lin es" test, check this	e 13, 16a, or 16b, s box and stop he i	and line 14 r e. Explain	▶□
b	organization	st—2018. If the or zation meets the "f	rganization did not facts-and-circumst	t check a box on li cances" test, check	ne 13, 16a, 16b, o this box and stop	r 17a, and line here.	▶□
18	supported organization Private foundation. If the organizat						▶□
	instructions						▶ 📙

P		ort Schedule for					1:6	-1- D-177 75
		olete only if you c ganization fails to					to qualify (inder Part II. If
Se	ction A. Public S							
	Calendar (or fiscal year beg		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contr							
	membership fees re include any "unusu							
2	Gross receipts from	admissions,						
_	merchandise sold o							
	performed, or facili							
	any activity that is							
2	organization's tax-e							
3	not an unrelated tr							
	under section 513							
4	Tax revenues levie							
	organization's bene to or expended on							
5	The value of service							
•	furnished by a gove							
	the organization wi							
6	Total. Add lines 1							
7a	Amounts included of							
h	3 received from dis Amounts included of							
	received from othe							
	persons that excee							
	\$5,000 or 1% of th	e amount on line						
_	13 for the year. Add lines 7a and 7l							
8	Public support. (9							
٠	from line 6.)	Subtract mic 7c						
Se	ction B. Total S	upport						
	Calendar		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	(or fiscal year beg		(a) 2013	(6) 2010	(0) 2017	(d) 2010	(e) 2019	(1) Total
9	Amounts from line							
10a	Gross income from dividends, paymer	'						
	securities loans, re							
	income from simila	' '						
b	Unrelated business							
	(less section 511 t businesses acquire							
	1975.	ed after June 30,						
c	Add lines 10a and	10b.						
11	Net income from u	inrelated business						
	activities not inclu							
	whether or not the							
12	regularly carried o Other income. Do	not include gain or						
	loss from the sale							
	(Explain in Part VI							
13	Total support. (A	Add lines 9, 10c,						
14		ı f the Form 990 is fo	r the organization	ı's first, second, tl	nird, fourth, or fift	th tax year as a sec	tion 501(c)(3) organization,
	-	stop here	_			•		· · · —
Se	ction C. Comput							
15		entage for 2019 (lin			column (f))		15	
16		centage from 2018 S					16	
	ction D. Comput		*	*			1 1	
17		percentage for 201			line 13, column (1	f))	17	
18		percentage from 2		,	,	,,	18	
	331/3% support t		,	•				d line 17 is not
	more than 33 1/3%,							
	33 1/3% support							
,		L/3%, check this box	-			•		_

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
```

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	excess of income from activity
3	Administrative expenses paid to accomplish exempt purposes of supported organizations
4	Amounts paid to acquire exempt-use assets
5	Qualified set-aside amounts (prior IRS approval required)
6	Other distributions (describe in Part VI). See instructions
7	Fotal annual distributions. Add lines 1 through 6.
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions
9	Distributable amount for 2019 from Section C, line 6
10	Line 8 amount divided by Line 9 amount
	Section E. Distribution Allocations (i) (ii) (iii)

	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in Part VI). See instructions	nich the organization is respon	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Continue Build the time Allegations	413	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1			Underdistributions	Distributable
2	(see instructions)		Underdistributions	Distributable

9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
a Applied to underdistributions of prior years			

2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.		
3 Excess distributions carryover, if any, to 2019:		
a From 2014		
b From 2015		
c From 2016		
d From 2017		
e From 2018		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
 Carryover from 2014 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		

C FIGHT 2019		
d From 2017		
e From 2018		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
 Carryover from 2014 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to		

j Remainder. Subtract lines 3g, 3n, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
a Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		

c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2019)

b Excess from 2016. . . . c Excess from 2017. **d** Excess from 2018. . . . e Excess from 2019.

Schedule A (Form 990 or 99	0-EZ) 2019	Page 8
Section A, lines Part IV, Section	I Information. Provide the explanations required by Part II, line 10; Part 5 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, s 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this p	on B, lines 1 and 2; Part IV, Section C, line 1; line 1; Part V, Section B, line 1e; Part V
	Facts And Circumstances Test	
]		
990 Schedule A, Suppl	emental Information	
Return Reference	Explanation	
I		

Other miscellaneous income from High Adventure Bases, Regions, and National Eagle Scout Association.

Schedule A, Part II, Line 10

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493321106270 OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

• S f the • S	Section or organi Section	527 organizations: Complet ization answered "Yes" or 501(c)(3) organizations that	01(c)(3)) organizations: Complete Parts e Part I-A only. n Form 990, Part IV, Line 4, or Form 9 : have filed Form 5768 (election under s : have NOT filed Form 5768 (election ur	90-EZ, Part VI, lin	ie 47 (Lobbying Activities mplete Part II-A. Do not co	mplete Part II-B.
f the Prox	organi ky Tax)		n Form 990, Part IV, Line 5 (Proxy Tax s), then			
Nar	ne of th	ne organization	•		Employer iden	tification number
ВОТ	300013				22-1576300	
Par	t I-A	Complete if the organ	nization is exempt under sectio	n 501(c) or is	a section 527 organi	zation.
1	"politic	cal campaign activities")	ization's direct and indirect political can		•	or definition of
2			itures (see instructions)			\$
3			aign activities (see instructions)			
	t I-B	<u> </u>	nization is exempt under section			
1		,	x incurred by the organization under se			\$
2		•	ix incurred by organization managers u			\$
3 4a			cion 4955 tax, did it file Form 4720 for t	•		☐ Yes ☐ No
_	TE "Voc	s," describe in Part IV.				⊔ res ⊔ No
b Pari	t I-C		nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3)	
1			ed by the filing organization for section			\$
2	Enter	the amount of the filing org	anization's funds contributed to other o	rganizations for se	ction 527 exempt	\$
3	Total e	exempt function expenditure	es. Add lines 1 and 2. Enter here and or	n Form 1120-POL,	line 17b ▶	\$
4	Did th	e filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organi of poli	ization made payments. For tical contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver see (PAC). If additional space is needed,	ount paid from the ed to a separate p	filing organization's funds olitical organization, such a	. Also enter the amount
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1						
2						
3						
4						
5						
5						
or P	anerwor	rk Reduction Act Notice, see t	he instructions for Form 990 or 990-F7.	Cat	No E0094C Schodule C (Form 900 or 900-E7) 2010

(Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the separate instructions for lines 2a through 2f.)

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

Lobbying Expenditures During 4-Year Averaging Period

(a) 2016

1,000,000

229,286

250,000

(b) 2017

1,000,000

999.853

250,000

(d) 2019

1,000,000

200,300

250,000

Schedule C (Form 990 or 990-EZ) 2019

(e) Total

4,000,000

6,000,000

2,377,259

1,000,000

1.500.000

(c) 2018

1,000,000

947.820

250,000

Schedule C, Part II-A, Line A

Pa	ort II-B Complete if the organization is exempt under section 501(c)(3) and has NO Form 5768 (election under section 501(h)).	Γ filed				
For c	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		a)		(b)	_
	vity.	Yes	No	Ar	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b				-		
c			1	ł		
d						
е						
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		1			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	(c)(5), c	or secti	on		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par 1	Complete if the organization is exempt under section 501(c)(4), section 501 and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Panswered "Yes." Dues, assessments and similar amounts from members)1(c))(6
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	<u> </u>				—
_	expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess do the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see instructions)	4	1			
	Part IV Supplemental Information		1			
					<u> </u>	
	ovide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group li structions), and Part Il-B, line 1. Also, complete this part for any additional information.	st); Part II	-A, lines	1 and	2 (se	e —
	Return Reference Explanation					

Arrow WV, Inc.; 27-0441319; 1325 West Walnut Hill Lane; Irving, TX 75038

SCHEDULE D

DLN: 93493321106270

Schedule D (Form 990) 2019

OMB No. 1545-0047

Supplemental Financial Statements ► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2019

(Form 990)

	tment of the Treasury al Revenue Service ► Go to <u>www.irs.g</u>	► Attach to Form 990. ov/Form990 for instructions and	the latest infor	mation.		to Public pection
Naı	me of the organization				er identification r	
BOY	SCOUTS OF AMERICA			22-15763	300	
Pa	rt I Organizations Maintaining Don			<u> </u>		
	Complete if the organization answe					
	-	(a) Donor advised	l funds	(b)	Funds and other a	ccounts
	Total number at end of year					
•	Aggregate value of contributions to (during year Aggregate value of grants from (during year)					
ı L	Aggregate value at end of year		+			
	Did the organization inform all donors and don		 	viced foundation	th -	
,	organization's property, subject to the organization					res 🗌 No
5	Did the organization inform all grantees, donor charitable purposes and not for the benefit of t	he donor or donor advisor, or for any	other purpose o		ly for mpermissible	Yes 🗌 No
Pai	rt III Conservation Easements. Complete if the organization answer	ered "Yes" on Form 990, Part IV,	line 7.			
	Purpose(s) of conservation easements held by	the organization (check all that apply	/).			
	\square Preservation of land for public use (e.g.,	recreation or education) Pr	eservation of an	historically	important land ar	ea
	Protection of natural habitat	☐ Pr	eservation of a c	ertified hist	toric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year.	n held a qualified conservation contri	ibution in the for		servation eld at the End of	the Vear
а	Total number of conservation easements			2a	cia at the Ena of	the real
b	Total acreage restricted by conservation easem	ents		2b		
С	Number of conservation easements on a certific	ed historic structure included in (a) .		2c		
d	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, and not of	on a historic	2d		
3	Number of conservation easements modified, t tax year ▶	ransferred, released, extinguished, o	r terminated by	the organiz	ation during the	
ŀ	Number of states where property subject to co	nservation easement is located >				
•	Does the organization have a written policy regard enforcement of the conservation easemen			of violations	s, Ves	□No
j	Staff and volunteer hours devoted to monitorin	g, inspecting, handling of violations,	and enforcing co	nservation	easements during	the year
,	Amount of expenses incurred in monitoring, in	specting, handling of violations, and e	enforcing conserv	vation ease	ments during the	/ear
	\$					
3	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?			70(h)(4)(B))(i) □ Yes	□ No
)	In Part XIII, describe how the organization rep balance sheet, and include, if applicable, the to the organization's accounting for conservation	ext of the footnote to the organization				
ar	t III Organizations Maintaining Coll			er Simila	r Assets.	
.a	Complete if the organization answer If the organization elected, as permitted under			tement and	d halance sheet wo	irks of
.a	art, historical treasures, or other similar assets provide, in Part XIII, the text of the footnote to	held for public exhibition, education,	, or research in f			
b	If the organization elected, as permitted under historical treasures, or other similar assets helfollowing amounts relating to these items:					
((i) Revenue included on Form 990, Part VIII, line	1		•	\$	
(i	ii)Assets included in Form 990, Part X			•	\$	
2	If the organization received or held works of a following amounts required to be reported und			ncial gain, p	provide the	
а	Revenue included on Form 990, Part VIII, line	1		•	\$	0

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D

b Buildings

 ${f c}$ Leasehold improvements \boldsymbol{d} Equipment

e Other . .

5che	dule D	(Form 990) 2019									Page 2
Par	t III	Organizations Ma	aintaining Collections	of Art, H	listorica	al Treas	sures, or	Other :	Similar A	ssets (co	ontinued)
3		g the organization's acq s (check all that apply):	uisition, accession, and othe	r records,	check ar	y of the f	following tl	hat are a	significant (use of its	collection
а	✓	Public exhibition			d	☐ Loa	n or excha	ange prog	rams		
b		Scholarly research			e	☐ Oth	ner				
С	✓	Preservation for future	e generations								
4	Provi Part)		organization's collections and	d explain h	how they	further t	he organiz	ation's ex	empt purpo	se in	
5			anization solicit or receive donds rather than to be mainta							☐ Yes	☑ No
Pa	rt IV		codial Arrangements. ganization answered "Yes	s" on Fori	m 990,	Part IV,	line 9, or	reporte	d an amoi		
1a	Is the	e organization an agent ded on Form 990, Part I	trustee, custodian or other X?	intermedi 	iary for co	ontributic	ons or othe	er assets r	not 	☐ Yes	□ No
b	TE "V	os " ovalaia the arrange	ement in Part XIII and compl	ata tha fal	llowing +-	, blo	Г			mount	
C		, ,			_		ŀ	1c		inounc	
d							Г	1d			
е		• .	r				F	1e			
f		- ,					F	1f			
2a	Did tl	- he organization include	an amount on Form 990, Pa	ırt X, line 2	21, for es	scrow or o	ے custodial a	ccount lia	bility?	☐ Yes	 □ No
b	If "Y∈	es," explain the arrange	ement in Part XIII. Check her	e if the ex	kplanation	n has bee	n provided	d in Part X	(III		
Pa	rt V	Endowment Fund	ds.								
		Complete if the or	ganization answered "Yes						(I) =		
1 2	Reginn	ning of year balance .	(a) Curre	7,992,745	(b) Prio	or year 6,897,412	(c) Two ye	ears back 1,635,644	(d) Three ye	398,147	e) Four years back 256,278,087
	_	outions		994,760		716,996		2,587,146		663,243	516,596
		vestment earnings, gair	ns, and losses	4,555,661	-2	3,512,503		3,653,977	9,	216,933	-9,594,314
		or scholarships		3,964,049		517,227		698,682		978,159	938,480
	Other	expenditures for facilition	es	127,281	2	5,260,100		138,941	41,	516,874	30,327,913
f		istrative expenses .		991,067		65,564		141,732		147,646	1,523,189
		year balance		8,460,769	16	8,259,014	21	6,897,412	181,	635,644	214,410,787
2		•	ntage of the current year en	d balance	(line 1a.	column (a)) held as	 s:		-	
а		d designated or quasi-e	- ·		(, ,				
b	Perm	anent endowment >	63.33 %								
c	Temp	orarily restricted endov	wment ▶ 8.23 %								
_	The p	percentages on lines 2a	, 2b, and 2c should equal 10	0%.							
3а		here endowment funds nization by:	not in the possession of the	organizati	ion that a	re held a	and admini	stered for	the		Yes No
	-	nrelated organizations								3a(
b		elated organizations .	lated organizations listed as		n Schad	 Ile R?				3a(3I	
4		,	ended uses of the organization	•							
	rt VI	Land, Buildings,					line 11a	See For	m 990 Pa	rt X line	10
	Descri	iption of property	(a) Cost or other basis		or other ba				epreciation) Book value
			(investment)							·	
1.	Land		0			17,793,19	1				17,793,191

0

0

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

107,952,518

112,828,859

204,783

51,142,266

33,465,938

27,244

56,810,252

79,362,921

177,539

Part VII	Investments—Other Securities.				
	Complete if the organization answered "Yes" on F (a) Description of security or category	Form 990, Part IV, li (b) Book value	ne 11l		art X, line 12.
	(including name of security)				year market value
	al derivatives				
(3) Other _ (A) BSA Cor	nmingled Endowment Fund LP	80,216,326			F
(B)	mininged Endominate Fund E	00/210/020			
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					_
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 12.)	80,216,326			
Part VIII	Investments—Program Related.				
	Complete if the organization answered 'Yes' on F (a) Description of investment	-orm 990, Part IV, II	ne 110	(b) Book value	(c) Method of valuation:
	(-,			(2, 20011 12111	Cost or end-of-year market value
(1)					75.05
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 13.)		•		
Part IX	Other Assets.	Samuel COOL Down TV / His		5 5 000 5	
	Complete if the organization answered 'Yes' on Formal (a) Description	orni 990, Part IV, ili	ie iiu	. See Form 990, Par	(b) Book value
	DMPANY RECEIVABLE NUITY AND OTHER ASSETS				342,915,025 8,752,056
(3)	NOTH AND OTHER ASSETS				6,732,030
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	ımn (b) must equal Form 990, Part X, col.(B) line 15.)				351,667,081
Part X	Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990, Part IV. lir	ne 11e	or 11f.See Form	990, Part X, line 25.
1.	(a) Description of li				(b) Book value
(1) Federal (3)	income taxes				0
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 25.)				240,394,070
	or uncertain tax positions. In Part XIII, provide the text o				
organization	's liability for uncertain tax positions under FIN 48 (ASC 7	/40). Check here if the	text of	the rootnote has be	en provided in Part XIII 🗀

Schedule D (Form 990) 2019

	Complete if the organi	zation answered 'Yes' on Form 990, Part	IV, li	ine 12a.		
1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
C	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.) $\ .$		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.) $\ .$		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.)			5	
Par		penses per Audited Financial Statem		•	Retur	n.
	·	zation answered 'Yes' on Form 990, Part			T .	
1	'	dited financial statements			1	
2	Amounts included on line 1 but no	, ,		I		
a	Donated services and use of facili		2a			
b	Prior year adjustments		2b		_	
С	Other losses		2c		_	
d	Other (Describe in Part XIII.) .		2d		_	
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F			1		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.) .		4b		_	
С	Add lines 4a and 4b				4c	
5		1c. (This must equal Form 990, Part I, line 18.) .		5	
Pai	t XIII Supplemental Info	ormation				
Prov XI,	ride the descriptions required for P ines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and $^\circ$ s 2d and 4b. Also complete this part to provide	4; Pari any a	t IV, lines 1b and 2b; Par Idditional information.	t V, line	e 4; Part X, line 2; Part
	Return Reference		Ex	planation		
See A	Additional Data Table					

Page 4

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: 19009572
Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 1	The National Council possesses artifacts, fine art, and multimedia archives last appraised in November 2017 at approximately \$80,000,000. The collections are located at the Nationa I Scouting Museum in Cimarron, New Mexico, Summit Bechtel Reserve, and the National Servic e Center. The majority of the high-valued fine art is located at U.S. Art Storage in Dalla s, Texas. The museum also houses collections of Scouting memorabilia, objects, and archiva I documents. In conformity with accounting policy generally followed by museums, these col lections are not recognized as assets in the Consolidated Statement of Financial Position; however, costs associated with insuring and maintaining these collections have been expen sed. During 2019, no major additions or disposals of collections items occurred.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part III, Line 4	Extensive collection of Scout memorabilia and Rockwell paintings reflecting Boy Scouts in daily life are on display for the enjoyment of members, volunteers, and visitors. Encourag ing boys to explore the many facets of Scouting.

Sı

upplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 1a	The difference in beginning balance compared to the prior year ending balance is due to the correction of a misclassification the prior year.

Su

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4	Endowments consist of approximately 112 individual funds established for a variety of purp oses. The endowment includes both donor-restricted endowment funds and funds designated by the Executive Board to function as endowments. Net assets associated with endowment funds , including funds designate by the Executive Board to function as endowments, are classifi ed and reported based upon the existence or absence of donor-imposed restrictions or in ac cordance with the Executive Board's interpretation of relevant law.

SCHEDULI (Form 990)	Joint	ement of A	Activities	Outside the Un	ited States	OMB No. 1545-0047
(F01111 990 <i>)</i>	► Comp	_	► Attach t	Yes" to Form 990, Part IV, I to Form 990. nstructions and the latest in		2019 Open to Public
Department of the Internal Revenue	Treasury		, , , , , , , , , , , , , , , , , , , ,			Inspection
Name of the o BOY SCOUTS (Employer ide	ntification number
					22-1576300	
	General Informatior Form 990, Part IV, line		Outside the U	Jnited States. Comple	ete if the organization a	answered "Yes" on
1 For gra	antmakers. Does the o	rganization mai	ntain records to	substantiate the amoun	t of its grants and	
other a	ssistance, the grantees	eligibility for th	e grants or assi	stance, and the selectior	criteria used	
to awar	d the grants or assistar	nce?				☑ Yes ☐ No
	antmakers. Describe in the United States.	Part V the orga	anization's proce	dures for monitoring the	use of its grants and o	ther assistance
A -41: .:4	s per Region. (The followi	ng Part I. line 3 t	able can be dupli	icated if additional space is	needed.)	
3 Activites	- F 3 (, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3 Activities	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of service(s) in the region	a (f) Total expenditures for and investments in the region
See Add	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants	(e) If activity listed in (d) is program service, describe specific type of	for and investments
	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of	for and investments
	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of	for and investments
	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of	for and investments
	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of	for and investments
See Add See Add Sub-tota	(a) Region	(b) Number of offices in the	(c) Number of employees, agents, and independent contractors in the	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is program service, describe specific type of	for and investments

Schedule F (Form 990) 2019						•	Page 2			
Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1 (a) Name of organization (b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
	Central America and the Caribbean	Support International Scouting	87,654	wire transfers						
	Europe (including Iceland and Greenland)	Support International Scouting	504,829	wire transfers						
		Support International Scouting	87,400	wire transfers						
				1			1			
2 Enter total number of recipien exempt by the IRS, or for whi							11			

Schedule F (Form 990) 2019

Type of grant or assistance	uplicated if addit (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash	(g) Description of noncash	(h) Method of valuation
		recipients	Cash grant	aispui sement	assistance	assistance	(book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☑ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	· ·	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	☑ No

Schedule F (F	orm 990) 2019 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. LILE F, Supplemental Information
Return Referenc	Explanation e
Schedule F Part I, Line	The organization has an established relationship with the existing world Scouting organizations that are given grants. These specific organizations are supported due to their effectiveness and legitimacy with program documentation and finances. The organization is in contact with these organizations regularly to follow up on projects and ensure compliance.

Additional Data

Europe (including Iceland and

Greenland)

Software ID: 19009572 **Software Version:** v1.00

EIN: 22-1576300
Name: BOY SCOUTS OF AMERICA

Support International

Scouting

504,829

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	, -	Support International Scouting	87,654

0 Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 |Grantmaking Support International 87,400 Scouting Central America and the 0 | Speaking at Seminars or Support International 1.818 Caribbean Conferences Scouting.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Fast Asia and the Pacific 0 Program Services Review supply vendor 69,235 facilities. Europe (including Iceland and 0 | Program Services Support International 64,101 Greenland) Scouting.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of reaion service(s) in region region services, grants to recipients located in the reaion) North America (including 0 Program Services World Scout Jamboree 3.134 Canada and Mexico, but not meetinas. the United States) Russia and the newly 0 Program Services Support International 1,281 independent States Scoutina.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 Program Services Support International 81,369 Scouting. Central America and the 0 Investments 2,127,263 Investments of Caribbean Endowments.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of reaion service(s) in region region services, grants to recipients located in the reaion) Europe (including Iceland and 682,913 0 IInvestments Investments of Greenland) lendowments. 2 Program Services Northern Tier High 1,079,196 North America (including Canada and Mexico, but not Adventure Base Programs. the United States)

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493321106270OMB No. 1545-0047

2019

Open to Public Inspection

OY SCOUTS OF AMERICA					Employer ide	illilication number			
OT SCOUTS OF AMERICA					22-1576300				
	ctivities. Complete if lers are not required to				orm 990, Part IV, line 1	.7.			
Indicate whether the org	janization raised funds th	rough any	of the fo	ollowing activities. Check	all that apply.				
a 🗹 Mail solicitations			е	e 🗹 Solicitation of non-government grants					
b Internet and email so	olicitations		f	f Solicitation of government grants					
c Phone solicitations			g	g 🗸 Special fundraising events					
d 🗹 In-person solicitation	ıs								
2a Did the organization hav or key employees listed	e a written or oral agreer in Form 990, Part VII) or				· · · · · · · · · · · · · · · · · · ·	es 🗆 No			
	est paid individuals or ent ast \$5,000 by the organiz		draisers)	pursuant to agreements	under which the fundraise	er is			
i) Name and address of indiv or entity (fundraiser)	idual (ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No						
America's Charities 14150 Newbrook Dr Suite 110 Chantilly, VA 20151	Employee Annual Giving Campaign and Federated Campaigns.	Yes		47,852	21,497	26,355			
Automotive Recovery Serv Two Westbrook Corporate Center Suite 500 Westchester, IL 60154		Yes		257,319	68,441	188,878			
otal			•	305.171	89.938	215 233			

AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, PR, RI, SC, TN, UT, VA, WA, WI, WV

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

1 Gross receipts	Florida Seabase - Tarpon Fishing Tournament (event type) 195,414 74,346 121,068 0 4,738 46,072 4,363 450 12,003	86,500 54,250 0 1,900 42,463 4,285	10,517 15,798 0 1,650 12,180	171,36 191,11
1 Gross receipts	74,346 121,068 0 4,738 46,072 4,363	86,500 54,250 0 1,900 42,463 4,285	10,517 15,798 0 1,650 12,180	171,36 191,11
2 Less: Contributions	74,346 121,068 0 4,738 46,072 4,363	86,500 54,250 0 1,900 42,463 4,285	10,517 15,798 0 1,650 12,180	171,36
3 Gross income (line 1 minus line 2)	121,068 0 4,738 46,072 4,363 450	54,250 0 1,900 42,463 4,285	15,798 0 1,650 12,180	191,11
line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 on Form 990-EZ, line 6a. 1 Gross revenue 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses	4,738 46,072 4,363 450	0 1,900 42,463 4,285	1,650 12,180	
5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 on Form 990-EZ, line 6a. 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses	4,738 46,072 4,363 450	1,900 42,463 4,285	1,650 12,180	
6 Rent/facility costs	46,072 4,363 450	42,463 4,285	12,180	0.30
10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 Part III Gaming. Complete if the orgon form 990-EZ, line 6a. 1 Gross revenue	4,363 450	4,285	,	8,28
10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 Part III Gaming. Complete if the orgon on Form 990-EZ, line 6a. 1 Gross revenue	450	·	2.454	100,71
10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 Part III Gaming. Complete if the orgon on Form 990-EZ, line 6a. 1 Gross revenue		•	2,451	11,09
10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 Part III Gaming. Complete if the orgon on Form 990-EZ, line 6a. 1 Gross revenue	12 003	U	0	45
11 Net income summary. Subtract line 10 Part III Gaming. Complete if the organism on Form 990-EZ, line 6a. 1 Gross revenue	12,003	3,459	0	15,46
Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	hrough 9 in column (d)		>	136,01
on Form 990-EZ, line 6a. 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses			.	55,10
1 Gross revenue	anization answered "Ye	es" on Form 990, Part I	IV, line 19, or reported	more than \$15,000
2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other unect expenses				
5 Other unect expenses				
	☐ Yes %	☐ Yes %	☐ Yes %	
6 Volunteer labor	☐ No	□ No	□ No	
7 Direct expense summary. Add lines 2 t	brough 5 in column (d)			
		. (4)		
8 Net gaming income summary. Subtrac				
Enter the state(s) in which the organization Is the organization licensed to conduct ga	aming activities in each of	these states?		Yes No
b If "No," explain:				
•• Oa Were any of the organization's gaming lice				Yes No

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ning activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ▶						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3		
		pt activities during the tax year					
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No. 1545-0047

DLN: 93493321106270

Open to Public

Department of the Treasury		► Go to <u>wu</u>	Attach to Forn w.irs.gov/Form990 fo		on.		Inspection
Internal Revenue Service Name of the organization						Employer identific	ation number
BOY SCOUTS OF AMERICA	_					22-1576300	
		and Assistance					
Does the organization main the selection criteria used	ntain records to sub to award the grants	or assistance?	the grants or assistance,	the grantees eligibility	for the grants or assistanc	e, and	☑ Yes ☐ N
2 Describe in Part IV the org	•	_	=		1.00		
			ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
							59
For Paperwork Reduction Act Notice				Cat. No. 5005			edule I (Form 990) 2019

See Additional Data Table (1) (2) (3)	1	recipients		cash gra	··· ·	noncash assistance	FMV, appraisal, other	,	
(2)									
(3)	ì								
•									
(4)									
(5)									
(6)									
(7)									
Part IV Supplemental In	nformation.	Provide the i	 informatio	on required in	Part I, l	ine 2; Part III, colur	nn (b); and any other ac	dditional	information.
Return Reference	Explanation								

Additional Data

ALOHA COUNCIL 104

HONOLULU, HI 96817 Andrew Jackson Council 303

JACKSON, MS 392021199

855 RIVERSIDE DR

42 PUIWA ROAD

99-0073482

64-0303071

Software ID: 19009572 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

501(c)(3)

501(c)(3)

(a) Name and address of	(D) EIM	(c) IRC section	(a) Amount of cash	(e) Amount of non-	(1) Method of Valuation	ı
organization		if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	
						ı

(h) Purpose of grant

Scholarship to support

Scholarship to support

local council Scouting.

local council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of /L) CIN (a) IDC applian (d) Amount of each (c) Amount of you (f) Mothed of voluntion (g) Description of non-cash assistance or assistance

140,240

11,685

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Anthony Wayne Area Council 35-0876343 501(c)(3) 7.260 Scholarship to support

local council Scouting.

157 8315 W Jefferson Blvd Fort Wayne, IN 46804			·		local council Scouting.
Atlanta Area Council 92	58-0566122	501(c)(3)	24,570		Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1800 CIRCLE 75 PKWY SE

ATLANTA, GA 303393055

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Scholarship to support local council Scouting.

Blackhawk Area Council 660 2820 MCFARLAND ROAD ROCKFORD.IL 61107	36-2169127	501(c)(3)	22,610		Scholarship to support local council Scouting.

100,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

BLUE MOUNTAIN COUNCIL 604

8478 WEST GAGE BLVD KENNEWICK, WA 993361075 91-0575959

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CALIFORNIA INLAND EMPIRE 95-1744350 501(c)(3) 125.057 Scholarship to support COUNCIL 45 local council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

00011011	
1230 INDIANA	CT
REDLANDS, CA	923742100
CASCADE PACIF	IC COUNCI
NO 492	

2145 NAITO PKWY PORTLAND, OR 972015197 93-0386792

501(c)(3) 125,252

Scholarship to support local council Scouting.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Scholarship to support

86-0107516 501(c)(3) 110.000 CATALINA COUNCIL 11 2250 E BROADWAY BLVD TUCSON, AZ 85719

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, GA 31901

Hocal council Scouting. Chattahoochee Council 91 58-0601576 501(c)(3) 6.563 Scholarship to support 1237 1ST AVE llocal council Scouting.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Scholarship to support llocal council Scouting.

CHEROKEE AREA COUNCIL 469 520 S QUAPAW BARTLESVILLE, OK 74003	62-0475671	501(c)(3)	10,145		Scholarship to support local council Scouting.
Coronado Area Council No 192	48-0545921	501(c)(3)	7,760		Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

644 S OHIO ST SALINA, KS 674013346

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) OF LIBERTY COUNCIL 22 4252052 E04()(3) 20.054

525 1485 VALLEY FORGE ROAD WAYNE, PA 19087	23-1352052	501(6)(3)	26,951		local council Scouting.
CRATER LAKE COUNCIL NO 491	93-0386820	501(c)(3)	100,000		Scholarship to support local council Scouting.

3039 HANLEY RD CENTRAL POINT, OR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

975021474

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Crossroads Of America Council 35-0867962 501(c)(3) 16.043 Hook Endowment Grant

local council Scouting.

No 160 7125 FALL CREEK RD NORTH INDIANAPOLIS, IN 46256					to support Scouting.
De Soto Area Council No 13	71-0238849	501(c)(3)	6,555		Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

De Soto Area Council No 13 71-0238849 118 W PEACH ST

EL DORADO, AR 717305611

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government rship to support

DENVER AREA COUNCIL NO 61 10455 W 6TH AVE STE 100 DENVER, CO 80215	84-0404225	501(c)(3)	10,000		Scholars local cou

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TOLEDO, OH 436230728

ouncil Scouting. Erie Shores Council No 460 11,302 Scholarship to support 34-4427945 501(c)(3) llocal council Scouting. PO BOX 8728

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 86-0101295 501(c)(3) 125.106 GRAND CANYON COUNCIL 10 Scholarship to support 2969 N GREENFIELD RD llocal council Scouting.

Scholarship to support local council Scouting.

94.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

PHOENIX, AZ 850167715

GRAND COLUMBIA COUNCIL
NO 614

12 NORTH 10TH AVE YAKIMA, WA 98902 91-1550528

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 82-0200747 501(c)(3) 125.000 GRAND TETON COUNCIL 107 Scholarship to support

3910 SOUTH YELLOWSTONE llocal council Scouting. HWY IDAHO FALLS, ID 83402

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ANCHORAGE, AK 995044041

GREAT ALASKA COUNCIL 610 92-0016314 501(c)(3) 100.000 Scholarship to support 3117 PATTERSON ST local council Scouting.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 87-0212460 501(c)(3) 135.208 GREAT SALT LAKE COUNCIL Scholarship to support 590 local council Scouting. 525 FOOTHTLL BLVD

SALT LAKE CITY, UT 841131199 501(c)(3) 139,225 GREAT SOUTHWEST COUNCIL 85-0102305 Scholarship to support NO 412 llocal council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

871095820

5841 OFFICE BLVD NE ALBUQUERQUE, NM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance assistance other) or government Greater Alabama Council No 1 63-0302107 501(c)(3) 38.193 Scholarship to support

Scholarship to support local council Scouting.

Greater Alabama Council No 1 63-0302107 501(c)(3) 38,193
516 LIBERTY PARKWAY
BIRMINGHAM, AL 352430307 Scholarship to support

110.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

GREATER WYOMING COUNCIL

3939 CASPER MOUNTAIN RD CASPER, WY 82601

83-0173481

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government GREATER YOSEMITE COUNCIL 94-1186155 501(c)(3) 127.600 Scholarship to support

local council Scouting.

59 4031 TECHNOLOGY DR MODESTO, CA 95356		,,,,,	·		local council Scouting.
Hawk Mountain Council No 528	23-1352047	501(c)(3)	6,943		Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5027 POTTSVILLE PIKE

READING, PA 196059713

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) TNIDTANI NIATTONIC COLINICTI 72-0570220 E01/c)/2) 14 502 Grant cupporting Indian

488 4295 S GARNETT RD TULSA, OK 74146	73-0379230	301(0)(3)	17,303		camperships and high adventure bases.
INLAND NORTHWEST COUNCIL 611	91-0567262	501(c)(3)	100,000		Scholarship to support local council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

411 W BOY SCOUT WAY SPOKANE, WA 992012243

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Hook Endowment Grant

Ito support Scouting.

JAYHAWK AREA COUNCIL 197 1020 SE MONROE ST	48-0543748	501(c)(3)	5,600		Scholarship to support local council Scouting.
TOPEKA, KS 666121110					liocal council Scou

16.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

La Salle Council 165

1340 SOUTH BEND AVE

SOUTH BEND, IN 46617

35-0867966

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 88-0059265 501(c)(3) 125.000 LAS VEGAS AREA COUNCIL Scholarship to support 328 local council Scouting.

7220 S PARADISE RD LAS VEGAS, NV 89119 Lincoln Heritage Council 205 61-0445839 501(c)(3) 7.752

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOUISVILLE, KY 40299

Scholarship to support 12001 SYCAMORE STATION llocal council Scouting. PLACE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Scholarship to support local council Scouting.

Longs Peak Council 62 2215 23RD AVE GREELEY, CO 806321166	84-0253710	501(c)(3)	13,002		Scholarship to support local council Scouting.

123.875

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Mid-America Council 326

12401 WEST MAPLE RD OMAHA, NE 681641853 47-0376545

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Scholarship to support

llocal council Scouting.

MIDNIGHT SUN COUNCIL 696	92-0027314	501(c)(3)	100,000		Scholarship to support
1400 GILLIAM WAY					local council Scouting.
FAIRBANKS, AK 997016044					

161.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Montclair State University

MONTCLAIR, NJ 07043

1 Normal Ave

22-6017209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) National Catholic Committee 53-0196617 501(c)(3) 10.000 Scholarship to support on Scouting local council Scouting.

55 BROAD ST RED BANK, NJ 07701 MOUNT BAKER COUNCIL 606 91-1622046 501(c)(3) 5.437

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EVERETT, WA 98223

Scholarship to support 1715 100TH PLACE SE llocal council Scouting. SUITE B

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government arship to support

llocal council Scouting.

NEVADA AREA COUNCIL 329	88-0059912	501(c)(3)	125,000		Scholars
500 DOUBLE EAGLE COURT			Ĭ .		local co
RENO, NV 89521					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3231 ATLANTIC AVENUE RALEIGH, NC 27604

council Scouting. Occoneechee Council 421 56-0529984 501(c)(3) 213,689 Scholarship to support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 82-0288020 501(c)(3) 115.000 ORE-IDA COUNCIL 106 Scholarship to support 8901 W FRANKLIN RD llocal council Scouting.

BOSIE, ID 837090638

PACIFIC HARBORS COUNCIL 9

PACIFIC HARBORS COUNCIL 91-0564954 501(c)(3) 132,034 Scholarship to support local council Scouting. 4802 SOUTH 19TH STREET TACOMA, WA 98405

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Lack Endowment Grant Dathway Ta Advantura Council 47 FOCE 730 E01/-1/21 16 0001

811 W HILLGROVE AVENUE LAGRANGE, IL 605255822	47-5066720	501(c)(3)	16,000		to support Scouting.
Philanthropic Ventures Fdn 1222 PRESERVATION PARK	94-3136771	501(c)(3)	5,356		Scholarship to support local council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAKLAND, CA 946121201

WAY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Quapaw Area Council 18 23-7627149 501(c)(3) 23.709 Scholarship to support llocal council Scouting.

llocal council Scouting.

3220 CANTRELL RD LITTLE ROCK, AR 722021847 84-0405244 501(c)(3) 100.000 Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ROCKY MOUNTAIN COUNCIL

411 S PUEBLO BLVD PUEBLO, CO 810051204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government San Francisco Bay Area Council 94-1568616 501(c)(3) 14.485 Scholarship to support ncil Scouting.

local council Scouting.

28 1001 DAVIS ST SAN LEANDRO, CA 945771514		(-)(-)	- 7,		local council Scouting.
SEQUOIA COUNCIL 27	62-0476819	501(c)(3)	125,093		Scholarship to support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6005 NORTH TAMERA

FRESNO, CA 937113911

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government CNAKE DIVED COUNCIL 111 02 0200745 E01/-1/21 00 0001 Cabalanahin ta arranant

2988 FALLS AVE EAST TWIN FALLS, ID 833018423	82-0200743	301(c)(3)	90,000		local council Scouting.
SOUTHERN SIERRA COUNCIL	95-1642363	501(c)(3)	110 000		Scholarship to support

301(0)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2417 M ST

BAKERSFIELD, CA 933012341

llocal council Scouting.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 87-0212580 501(c)(3) 125.000 TRAPPER TRAILS COUNCIL 589 Scholarship to support 1200 EAST 5400 SOUTH llocal council Scouting.

OGDEN. UT 844034599 UTAH NATIONAL PARKS 87-0212468 501(c)(3) 125.000 Scholarship to support llocal council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COUNCIL 591 748 N 1340 WEST

OREM, UT 84057

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance assistance other) or government Ventura County Council 57 95-1716783 21.059 Scholarship to support

Scholarship to support local council Scouting.

Ventura County Council 57 95-1716783 501(c)(3) 21,059 Scholarship to support local council Scouting.

CAMARILLO, CA 93010

5.141

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Westark Area Council 16

1401 OLD GREENWOOD RD FORT SMITH, AR 72901 71-0236862

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 95-2788856 501(c)(3) 6.400 WESTERN LOS ANGELES Scholarship to support COUNTY COUNCIL 51 local council Scouting.

16525 SHERMAN WAY STE C8 VAN NUYS, CA 914063753

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GREENWICH, CT 06830

501(c)(3) 8.990 Greenwich Council No 67 06-0646654 Scholarship to support 63 MASON ST llocal council Scouting.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 04-2606869 501(c)(3) 25.467 HEART OF NEW ENGLAND Scholarship to support COUNCIL 230 llocal council Scouting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1980 LUNENBURG RD LANCASTER, MA 01523

Sea Base Scholarship Fund	18	47,076		
Sea Base Scholarship Fund	18	47,076		
Summit Summer Camp Scholarships.	9	16,000		
NESA Scholarships	41	174,500		

30,000

20,000

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

McElwain Eagle Scholarship

NCCS Doer Scholarship

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. NESA STEM Scholarship 31,250 NESA STEM Scholarship 31.250 Kiefer Scholarship 28.000 l Nt Jewish Comm On Scouting Scholarships. 11,000

19,000

264,857

Order Of Arrow Scholarships.

Cooke Eagle Scholarships.

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.									
Other	9	18,412							
Other	9	18,412							

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49332	21106	270	
Schedule J (Form 990)		Compensation Information					OMB No. 1545-0047		
		For certain Officers, Directors, Trustees, Key Employees, and Highest							
		Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2019		
Denar	tment of the Treasury	► Go to www.irs.ao		to Form 990. instructions and the latest inforn	mation.	Open i			
Intern	al Revenue Service	-				Insp	ectio	n	
	me of the organiza SCOUTS OF AMERIA				Employer identifica	tion nu	ımber		
					22-1576300				
Pa	rt I Questi	ons Regarding Compensa	tion				Yes	N	
1 a				the following to or for a person lister y relevant information regarding thes			Tes	No_	
	✓ First-class	s or charter travel		Housing allowance or residence for	personal use				
		companions		Payments for business use of person	nal residence				
		nification and gross-up payment	s 💆	Health or social club dues or initiation					
	☐ Discretion	nary spending account	Ц	Personal services (e.g., maid, chauf	feur, chef)				
b				follow a written policy regarding pays		1b	Yes		
2				or allowing expenses incurred by all	- 1-3	2	Yes		
	directors, truste	es, officers, including the CEO/E	executive Director	r, regarding the items checked on Lir	ie la?				
3	organization's C	EO/Executive Director. Check al	I that apply. Do r	ed to establish the compensation of th not check any boxes for methods CEO/Executive Director, but explain i					
	✓ Compens	ation committee	✓	Written employment contract					
		ent compensation consultant	☑	Compensation survey or study					
		of other organizations	✓	Approval by the board or compensa	tion committee				
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a				
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a	Yes		
b		r receive payment from, a suppl				4b	Yes		
С				nsation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	olicable amounts for each item in Part	: III.				
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9					
5	For persons liste		n A, line 1a, did t	the organization pay or accrue any					
а	·	1?				5a	Yes		
b	=					5b	1 63	No	
		5a or 5b, describe in Part III.							
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any					
а	The organization	1?				6a		No	
b						6b		No	
	· ·	6a or 6b, describe in Part III.							
7		persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed prents not described in lines 5 and 6? If "Yes," describe in Part III						No	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.						No		
9				presumption procedure described in		9		110	
For F	Panerwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 5	50053T Schedule 3	(Forn	1 990)	2019	

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report instructions, on row (ii). Do not list any individuals that are not listed on Form 99	compensation 0. Part VII.	n from the organization	n on row (i) and fro	om related organiza	tions, described i	n the		
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total	al amount of	Form 990, Part VII, S	ection A, line 1a, a					
(A) Name and Title	(B) B	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable benefits	columns	(F) Compensation in	
	(i) Base compensat	e (ii) ion Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table				1				

\$2,921, were not included in the employee's taxable compensation and were only reimbursed to the employee upon substantiation and submission of a business purpose. The Boy Scouts of America policy allows employees traveling with volunteers to upgrade to first/business class to allow the employee to discuss business during the flight. Also employees traveling extensively for philanthropic efforts are allowed to travel first/business class when potential or current donors are in first/business class to allow continued fundraising efforts. In addition, first/business class is allowed for certain employees that are required to travel extensively and also require special accommodations. The total first class travel for 2019 was \$15,707 and was not included in employee's taxable compensation and were only reimbursed to the employees upon substantiation and submission of a business purpose as to why first/business class accommodations were needed. Participants in

Page 3

Schedule 1 (Form 990) 2019

Schedule J, Part I, Line 4 The BSA's National Executive Board approved a non-qualified Retirement Benefits Restoration Plan for the benefit of all employees whose benefits would otherwise be limited by the Omnibus Budget Reconciliation Act of 1993. Benefits attributed under the Restoration Plan supplement those accrued under the qualified

the non qualified retirement restoration plan have the taxable portion grossed-up to cover the taxes.

Schedule J (Form 990) 2019

Retirement Plan and payments do not commence until an employee's retirement. Participants include employees with compensation over \$280,000. Michael Surbaugh \$134,227 restoration plan; Michael A Ashline \$36,889 restoration plan; Bradley Farmer \$121,626 restoration plan; Al Lambert \$13,772 restoration plan; Mark Logemann \$35,103 restoration plan; Erin Eisner \$9,298 restoration plan; Jeffrey Hunt \$63,498 restoration plan and Patrick Sterrett \$22,740 restoration plan. Bradley Farmer retired after 38 years of service in 2019 - the change of control payment (unused vacation and severance) was \$18,361 and his calculated

restoration plan benefit were higher because of retirement. Schedule J. Part I. Line 5 An Annual Incentive Plan was adopted with a component of compensation based on items such as: membership, obtaining funding commitments, maintaining **Software ID:** 19009572

Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule	еJ,	Part II - Officers, D	irectors, Trustees, K	ey Employees, and	Highest Compensate	d Employees		
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 Michael B Surbaugh President	(i)	469,042	200,833	239,562	179,273	30,193	1,118,903	0
	(ii)	0	0	0	0	0	0	0
1 Michael A Ashline Treasurer	(i)	390,475	92,605	73,202	139,872	24,812	720,966	0
··· susu. s.	(ii)	0	0	0	0	0	0	0
2 Steven McGowan Secretary	(i)	379,735	76,718	7,083	21,461	36,052	521,049	0
,	(ii)	0	0	0	0	0	0	0
3 Al Lambert ACSE, Outdoor Adventures	(i)	294,607	77,722	41,062	201,728	40,192	655,311	0
,	(ii)	0	0	0	0	0	0	0
4Mark Logemann ACSE, Natl Dir Support	(i)	301,052	81,222	63,470	157,325	37,088	640,157	0
Services	(ii)	0	0	0	0	0	0	0
5 Patrick Sterrett ACSE, Natl Dir Field	(i)	303,291	76,275	49,063	161,352	26,474	616,455	0
Services	(ii)	0	0	0	0	0	0	0
6 Todd McGregor Summit Group Director	(i)	205,713	0	8,415	187,019	38,790	439,937	0
	(ii)	0	0	0	0	0	0	0
7 Mark Winkelman Supply Group Director	(i)	261,150	1,000	13,593	41,749	27,597	345,089	0
,	(ii)	0	0	0	0	0	0	0
8 John Mosby ACSE, Development	(i)	290,212	42,985	38,805	160,028	34,295	566,325	0
	(ii)	0	0	0	0	0	0	0
9 Brad Farmer ACSE, Development	(i)	26,898	34,481	211,701	75,834	14,044	362,958	0
	(ii)	0	0	0	0	0	0	0
10 Ron Oats Regional Director	(i)	275,827	25,416	42,656	202,724	15,649	562,272	0
	(ii)	0	0	0	0	0	0	0
11Frederick Wallace Regional Director	(i)	266,324	19,358	27,723	202,189	27,102	542,696	0
	(ii)	0	0	0	0	0	0	0
12 Erin Eisner Chief Strategy Officer	(i)	374,520	88,468	24,259	29,945	16,141	533,333	0
	(ii)	0	0	0	0	0	0	0
13 Jeffrey Hunt Regional Director	(i)	171,817	0	179,062	148,921	10,729	510,529	0
	(ii)	0	0	0	0	0	0	0
14 Lisa Young HR Group Director	(i)	255,225	5,000	8,463	166,229	17,357	452,274	0
	(ii)	0	0	0	0	0	0	0
15 Vijay Challa Group Director - Chief	(i)	356,971	30,990	886	16,637	15,141	420,625	0
Information Officer	(ii)	0	0	0	0	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

2019

OMB No. 1545-0047

DLN: 93493321106270

Open to Public

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** BOY SCOUTS OF AMERICA 22-1576300 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On (i) Pool behalf of financing issuer Yes Yes No Yes No The County Commission of 55-6000314 11-05-2010 50,000,000 Construction and equipping of the Х Χ Χ Fayette County (WV) Summit Bechtel Family National Scout Reserve County Commission of Fayette 55-6000314 03-09-2012 175,000,000 Construction and equipping of the Summit Bechtel Family National County (WV) Scout Reserve Part II **Proceeds** C D 10,486,794 33,071,402 50,000,000 175,000,000 50,000,000 175,000,000

2 3 4 5 6 8 9 10 11 0 12 13 2013 2013 Yes No Yes No Yes Nο Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ

Part 🎹 **Private Business Use** Yes No Yes No Yes No Yes No 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Χ Are there any lease arrangements that may result in private business use of bond-financed 2 Χ Χ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50193E Schedule K (Form 990) 2019 6

8a

Part IV

b

C

Arbitrage

Page **2**

D

Schedule K (Form 990) 2019

No

Yes

В C D Α Yes Nο Yes No Yes No Yes No Are there any management or service contracts that may result in private business use of Χ Х If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b

Χ

6.96 %

2.93 %

9.89 %

Yes

C

No

Χ

Х

6.96 %

2.93 %

9.89 %

В

Yes

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Α

No

Χ

Χ

Χ

Χ

Yes

Χ

Х

Enter the percentage of financed property used in a private business use by entities other than

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

В

No

Explanation

Yes

Χ

No

Χ

Yes

Yes

Nο

No

Yes

Nο

Yes

Χ

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

No Arbitrage was incurred, therefore there is no Arbitrage Rebate.

Page 3

No

D

D

Nο

Yes

Yes

Schedule K (Form 990) 2019

(GIC)?

period?

Part V

Part VI

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

Return Reference

Commission of Fayette County (WV)

Schedule K, Part IV, Line 2c-11/05/2010 50,000,000 The County

Return Reference	Explanation
Schedule K, Part IV, Line 2c- 03/09/2012 175,000,000 County Commission of Fayette County (WV)	No Arbitrage was incurred, therefore there is no Arbitrage Rebate.

DLN: 93493321106270 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** BOY SCOUTS OF AMERICA 22-1576300 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles Χ 435 257,319 Fair Market Value 7 Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 11 741,043 Fair Market Value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ See Additional Data 26 Other ▶ (______) Other ▶ (______) 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2				
is reporting in Part I, co	nation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization blumn (b), the number of contributions, the number of items received, or a combination of both. Also ny additional information.				
Return Reference	Explanation				
Schedule M, Part I, Line 6	Number of vehicles donated.				
Schedule M, Part I, Line 9	Number of stocks donated.				
Schedule M, Part I, Lines 25-28	Number of donations.				
Schedule M, Part I, Line 32b	BSA contracted with Automotive Recovery Services (dba Insurance Auto Auctions-IAA) to manage the national "One Car, One Difference" program. 95% of the proceeds are distributed to local Councils. Distributions are based upon the donor's designation or, if none, payments are made to the local Council servicing the area of the donor's zip code.				
	Schedule M (Form 990) (2019)				

Additional Data

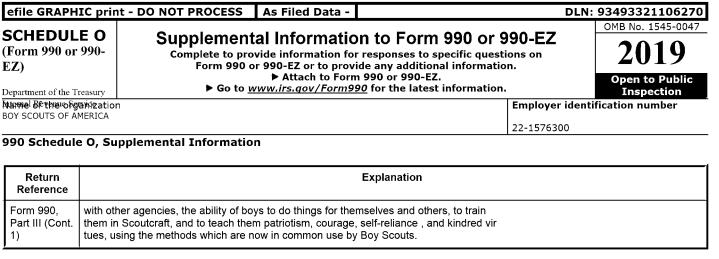
Software ID: 19009572 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Part I. Lines 25-28

Part 1, Lines 25-26				•	•
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
Other ▶ (Hammocks)	_	Х	1	8,798	Fair Market Value
Other ▶ (Targets)	_	Х	1	14,079	Fair Market Value
Other ▶ (Outdoor Conference Supplies	_)	X	1	19,589	Fair Market Value
Other ► (Audio Visual Equipment)	_	Х	1	1,390	Fair Market Value
Other ▶ (Gelding Horse)	_	Х	1	2,500	Fair Market Value
Other ▶ (2004 Ford F-550 Heavy Duty Truck	_)	X	1	18,000	Fair Market Value
Other ► (Cattle medical supplies and equipment	_)	Х	1	8,028	Fair Market Value



Return Explanation

990 Schedule O, Supplemental Information

Form 990,
Part IV, Line
ompleted and approved for release by the Board of Directors.

990 Schedule O, Supplemental Information Return

Form 990. Part VI.

Section B. Line 11b

Explanation Reference Form 990 was reviewed and approved by the Controller and National Legal Counsel. An execut

ive summary was prepared and that, along with Form 990 without Schedule B, was distributed to the Officers and the Audit Committee for their review. PricewaterhouseCoopers reviewed and signed Form 990 as paid preparer. Finally, Form 990 without Schedule B was distribute d to all Executive Board members before it was filed. Schedule B was not included due to c

onfidentiality agreements with donors, some of which are members of the Executive Board.

990 Schedule O, Supplemental Information

Return Explanation

Reference	
Form 990,	Annually a conflict of interest policy confirmation is required of the organization's Exec

Part VI,
Section B,
Line 12c
Line 12c
Line for every department. The organization uses
an outside company for anonymous reporting of potential ethics violations. A report of the
violation is e-mailed to Internal Audit and National Legal Counsel for thorough research,
review and resolution. The report, issue, and resolution are presented to the Audit Commi
ttee for review.

Return Explanation

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section B,
Line 15

The compensation committee of the National executive board used comparative data to determ ine the annual salaries of the key executives and officers of the BSA. They discussed and documented the decision for compensation in the meeting minutes of the committee.

Return Explanation
Reference

Form 990, Governing documents and conflict of interest policy are available upon request.

Part VI,
Section C,
Line 19

990 Schedule O, Supplemental Information

990 Schedule O, Supplemental Information Return Explanation Reference Write off of Pledges Receivable.

Form 990, Part XI, Line efile GRAPHIC print - DO NOT PROCESS | As Filed Data - SCHEDULE R | Related

Name, address, and EIN (if applicable) of disregarded entity

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

OMB No. 1545-0047

DLN: 93493321106270

Open to Public

Department of the Treasury
Internal Revenue Service
Name of the organization

Part I

BOY SCOUTS OF AMERICA

(Form 990)

► Attach to Form 990.► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

Legal domicile (state

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(b)

Primary activity

Inspection
Employer identification number

(f)

Direct controlling

22-1576300

(e)

End-of-year assets

Total income

			or foreign coul	ntry)				entity		
(1) BSA Asset Management LLC 1325 West Walnut Hill Lane Irving, TX 750383008 26-2473220	General Partner/Investme	ents	DE			0	N/A			_
(2) Atikokan Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base ope	ration	CA		829,23	7 0	N/A			
(3) Atikaki Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base ope	ration	CA		397,70	0	N/A			
(4) Association of Baptists for Scouting 1325 West Walnut Hill Lane Irving, TX 75038 74-6061216	Scouting		TX		54,39	344,153	N/A			
(5) Delaware BSA LLC 1325 West Walnut Hill Lane Irving, TX 75038 84-2764311	Scouting		DE		10,00	9,793	N/A			
(6) Texas BSA LLC 1325 West Walnut Hill Lane Irving, TX 75038 84-2782520	Scouting		TX		10,00	9,793	N/A			
Part II Identification of Related Tax-Exempt Organizations	. Complete if the org	anizatio	n answered	"Yes"	on Form 990	Part IV, line 34 b	ecau	se it had one or	more	
related tax-exempt organizations during the tax year. See Additional Data Table										
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) omicile (state gn country)	Exempt	(d) Code section	(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity	Section (13) co en	ntrolle tity?
									Yes	No
									+	
									1	
									+	
For Paperwork Reduction Act Notice, see the Instructions for Form 99			Cat. No. 5013!	L 5Y			So	hedule R (Form	990) 2	019

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h Dispropi allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k Percer owner
Commingled Endowment Fund LP		Endowment	DE	N/A	Excluded	50,274,230	96,425,955	Yes	NO	23,650	Yes	No No	43.2
st Walnut Hill Lane (750383008 14		investment											
												$\overline{}$	
Identification of Related Organi because it had one or more related							nswered "Ye	s" on I	Form '	990, Part I\	√, lin	e 34	
(a) Name, address, and EIN of related organization	(b) Primary activ		(c) Legal domicil state or fo country	e reign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp or trust)	(f) Share of total income		(g) e of end year assets	l-of- Perce	(h) centage s nership ((i) Section 13) cor enti
												\dashv	
												\perp	
												\perp	

scne	idule k (Form 990) 2019		Pa	age 3
Pa	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 [During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1 d	Yes	
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No

е	Loans or loan guarantees by related organization(s)	1		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
1	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o	Sharing of paid employees with related organization(s)	10	Yes	
				1

i Exchange of assets with related organization(s)				11		No	
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes		
f k Lease of facilities, equipment, or other assets from related organization(s)				1k	Yes	 	
l Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes		
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	Yes		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes		
o Sharing of paid employees with related organization(s)				10	Yes		
p Reimbursement paid to related organization(s) for expenses				1 p		No	
q Reimbursement paid by related organization(s) for expenses				1q	Yes	<u> </u>	
f r Other transfer of cash or property to related organization(s)				1r	Yes		
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				1s	Yes		
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this lir	ne, including covered	relationships and tra	ansaction thresholds.				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining ar	mount ir	nvolved	j	
(1)Scout Executives Alliance	m	12,000	Per tax return.				
(2)Scout Executives Alliance	r	606,896	Per tax return.				
(3)Arrow WV Inc	a-i	5,687,320	Interest expense incurred by Arrow through the construction of the Summit Bechtel Reserve, whi constructed by the Boy Scouts of America would be exempt.				
(4)BSA Commingled Endowment Fund LP	s	261,058,500	Per tax return.				
(5)BSA Commingled Endowment Fund LP	r	799,759	Per tax return.				

0	Sharing of paid employees with related organization(s)				10	Yes		
	Reimbursement paid to related organization(s) for expenses				1p 1q	Yes	No	
r	Other transfer of cash or property to related organization(s)				1r	Yes		
s	Other transfer of cash or property from related organization(s)				1s	Yes		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered	relationships and tra	nsaction thresholds.				
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount ir	volved		
(1) Sco	out Executives Alliance	m	12,000	Per tax return.				
(2) Sco	out Executives Alliance	r	606,896	Per tax return.				
(3) Arr	row WV Inc	a-i	5,687,320	Interest expense incurred by Ar construction of the Summit Becl constructed by the Boy Scouts of be exempt.	htel Rese	erve, wł	nich if	
(4) BS	A Commingled Endowment Fund LP	s	261,058,500	Per tax return.				
(5) BS	A Commingled Endowment Fund LP	r	799,759	Per tax return.				
		1	ı	Schedule R (I	Form 9	90) 2	019	

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate ?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
			1			ı				Schedul	e R (Form	990	0) 2019

Schedule R (Form 990) 2019										
Part VII	Supplemental Info	plemental Information								
Provide additional information for responses to questions on Schedule R. (see instructions).										
Return Reference		Explanation								

Additional Data Software ID: 19009572 **Software Version:** v1.00 **EIN:** 22-1576300 Name: BOY SCOUTS OF AMERICA Form 990, Schedule R, Part I - Identification of Disregarded Entities (c) (e) (f) (a) (b) (d) Legal Domicile End-of-year Name, address, and EIN (if applicable) of disregarded entity Direct Controllina Primary Activity Total income (State assets Entity or Foreign Country) BSA Asset Management LLC General Partner/Investments DE 0 N/A 0 1325 West Walnut Hill Lane Irving, TX 750383008 26-2473220 Atikokan Youth Ventures Inc High Adventure Base operation CA 829,237 0 N/A PO Box 509 Ely, MN 55731 Atikaki Youth Ventures Inc. High Adventure Base operation CA 397,709 0 N/A PO Box 509 Ely, MN 55731 Association of Baptists for Scouting TX 54,391 344,153 N/A Scouting 1325 West Walnut Hill Lane Irving, TX 75038 74-6061216 Delaware BSA LLC DE 10,000 9,793 N/A Scouting 1325 West Walnut Hill Lane Irving, TX 75038 84-2764311 Texas BSA LLC Scouting TX 10,000 9.793 N/A 1325 West Walnut Hill Lane Irving, TX 75038 84-2782520

(c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Exempt Code Direct controlling Legal domicile Public charity Section 512 (state section status entity (b)(13)or foreign country) (if section 501(c) controlled entity? (3)) Yes No DC 501(c)(3) 10 N/A Nο Youth development. 1329 West Walnut Hill Lane Irving, TX 75038 75-2396057 Support Scouting DC 501(c)(3) N/A No 1325 West Walnut Hill Lane Irving, TX 750383008 75-2675978

Support Learning for Life

programs.

employees

Support Scouts'

Welfare Benefits Plan

Develop program &

Support Scouting

World Jamboree

facility for Boy Scouts

ΤX

TX

ΤX

WV

DE

TX

501(c)(3)

501(c)(9)

501(c)(9)

501(c)(3)

501(c)(3)

501(c)(3)

12

Learning for Life

Boy Scouts of America

N/A

N/A

N/A

N/A

No

Yes

Yes

Yes

No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

1329 West Walnut Hill Lane

1325 West Walnut Hill Lane Irving, TX 750383008 27-0441319

1325 West Walnut Hill Lane Irving, TX 750383008 27-6850785

1325 West Walnut Hill Lane

Irving, TX 75038 37-1793510

Irving, TX 75038 26-2270708

PO Box 152079 Irving, TX 750152079 22-6069455

Benefits Plan P O Box 152079 Irving, TX 750152079 75-2347824